

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS | ID NO. | DATE     |
|---------------------|----------|--------|----------|
| FEE DETERMINATION   | PS       |        | 10/17    |
| O.I.P.E. CLASSIFIER |          | 72223  | 10/18/98 |
| FORMALITY REVIEW    | DM       |        | 10/15/98 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim | Date     |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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